## REPORT OF RECEIPTS AND DISBURSEMENTS

1. NAME OF COMMITTEE (in full)

For An Authorized Committee (Summary Page)

Friends of Sessions Senate Committee, Inc.		SECKE	RECEIVED. SECKETARY OF THE SENATE	
ADDRESS (number and street) Check if different than previous P.O. Box 4278	ously reported.	C00306704	FEBMBER AH II. 34	
CITY, STATE and ZIP CODE STATE/DISTRICT		3. IS THIS REPORT AN AMENDMENT?		
Montgomery, AL 36103 AL		☐ YES 📉	NO	
	F REPORT			
April 15 Quarterly Report Twelfth day report pre		eceding (Type of E	lection)	
July 15 Quarterly Report election on		in the State of		
October 15 Quarterly Report	tieth day report fo	cllowing the General Election of	חכ	
X January 31 Year End Report		in the State of	ragging or special and the state of the stat	
July 31 Mid-Year Report (Non-election Year Only)	mination Report		nojenov nose-na ne stranjenov skieni med ili nekolonisa, neg nejank name skielin 1884 1884 - 1884	
This report contains Primary Election Gen	neral Election	Special Election	Runoff Election	
SUM	MARY			
5. Covering Period 07/01/1999 through 12/31/19	999	COLUMN A This Period	COLUMN B Calendar Year-to-date	
6. Net Contributions (other than loans)				
(a) Total Contributions(other than loans) (from Line 11(e))  (b) Total Contribution Refunds (From Line 20(d))  (c) Net Contributions (other than loans)(subtract Line 6(b) from 6(a))		\$274174.91	\$676925.81	
		\$1000.00	\$2500.00	
		\$273174.91	\$674425.81	
7. Net Operating Expenditures				
(a) Total Operating Expenditures (from Line 17)		\$65788.50	\$90649.64	
		\$0.00	\$84.28	
(c) Net Operating Expenditures (Subtract Line 7(b) from 7(a))		\$65788.50	\$90565.36	
Cash on Hand at Close of Reporting Period (from Line 27)		\$679198.39	For further information: Federal Election Commission	
Debts and Obligations Owed TO the Committee     (itemize all on Schedule C and/or Schedule D)			999 E Street, NW Washington, DC 20463	
10. Debts and Obligations Owed BY the Committee \$0.00 (Itemize all on Schedule C and/or Schedule D)			Toll Free 800-424-9530 Local 202-219-3420	
T certify that I have examined this Report and to the best of my know and complete.	leage and Delief	n is true, correct		
Type or Frint Name of Treasurer William A. Newman, Jr.				
Signature of Treasurer	_		Date / 20 - 2006	
NOTE: Submission of false, erroneous, or incomplete information may	y subject the per	son signing this Report to pen	/- 28 - 2006 alties of 2 U.S.C. §437g.	
			FEC FORM (Revised 4/8	